

- Eating five portions of fruit, vegetables and salad per day
- Eating dairy foods such as milk, cheese and yoghurt which are important for calcium
- Increasing your activity – take part in regular exercise e.g. swimming / aquanatal / yoga.

Further advice can be found on NHS Choices web site.

You will be offered referral to a dietician.

You will be offered scans to date your pregnancy and check for anomalies. Scans will be arranged to check your baby's growth and position in later pregnancy.

Your blood pressure (BP) will be monitored regularly and a larger BP cuff will be used to check the measurements as it is more accurate.

A test for diabetes will be offered at 24 to 28 weeks (Glucose tolerance test (GTT)) and you will be given a leaflet explaining this procedure.

The anaesthetic department in the hospital will be advised of any pregnant woman with a BMI of 40 kg/m² or above. The anaesthetist will discuss a plan for pain relief in labour and anaesthesia for a caesarean if this becomes necessary.

At all times you will be treated with dignity and respect and will be involved in discussions about your care and the risks associated with your pregnancy.

What can be done to help?

Future pregnancies: Weight loss before you get pregnant is the ideal aim. Whilst this may not be possible during your pregnancy it is something you should seriously think about before trying to get pregnant again.

Useful information

Local Community Pharmacy - Your local community pharmacies offer a wide range of services including information and general advice on symptom relief medicines as well as a prescription collection and delivery service.

For impartial and confidential advice or information on the services provided by Bridgewater or to receive this leaflet in an alternative format call our Patient Services team on 0800 587 0562.

Midwifery Services
Health Care Resource Centre
Oaks Place
Widnes
Cheshire. WA8 7GD
Telephone: 0151 495 5079

 www.twitter.com/Bridgewater_NHS

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www.bridgewater.nhs.uk

Bridgewater Midwifery Services

Information about raised body mass index in pregnancy



Raised BMI in pregnancy

This leaflet discusses the problems with being overweight in pregnancy and how your care will be tailored to your specific needs.

At your booking appointment you will be weighed and your height measured. Your Body Mass Index (BMI) will be calculated using these measurements.

What is BMI?

Body mass index (BMI) is a tool for indicating weight “status” in adults over 20 years. It is possible for two people to have the same BMI but be very different in terms of fitness and “build”.

BMI (kg/m ²)	Weight Status	Recommended Weight Gain
Below 18.5	Underweight	12.5 – 18 kg (28 – 40lb)
18.5 – 24.9	Normal	11.5 – 16 kg (25 -35lb)
25.0 – 29.9	Overweight	7 -11.5 kg (15 – 25lb)
30.0 – 34.9	Obese	6+ kg (15+lb)
35.0 and over	Morbidly Obese	6+ kg (15+lb)

Source: (National Institute for Health and Clinical Excellence, 2010 updated 2017).

BMI ranges are based on the effect body weight has on health.

As the BMI increases, the risks for some diseases increase. This is the same for pregnant women.

Why is BMI used in pregnancy?

BMI is now calculated for all women at their booking appointment.

Evidence shows as your BMI increases above 30 kg/m² your risk increases to you and your baby.

What are the risks of a raised BMI?

Antenatal Period: Women who are overweight are at increased risk of developing pregnancy complications.

You are more likely to have a miscarriage, become diabetic, develop high blood pressure and have blood clots.

Scans to check for abnormalities of your baby are not as accurate in larger women. It is also more difficult to feel your baby in your tummy to check how big your baby is and to see which way your baby is lying.

Birth: Women with a raised BMI (greater than 35 kg/m²) may have problems moving about in labour and it can be more difficult to hear your baby’s heartbeat during labour.

Within Halton, if a woman has a BMI level less than 18kg/m² or greater than 35kg/m² we would advise her to deliver in hospital.

Your baby is likely to be bigger than average which may make your delivery more difficult. This increases the chance of needing help with your baby’s birth and you are more likely to require a caesarean section. This may be difficult to perform and therefore pose greater risk to you.

Epidurals and spinal blocks are more difficult to put in to larger women and general anaesthetics are riskier.

After the birth you are at an increased risk of getting blood clots in your legs.

If you have had a caesarean birth you are more likely to have complications with your wound healing.

Breast feeding your baby is recommended as there is less likelihood of your child becoming obese and therefore developing diabetes and other illnesses later in life.

Pregnancy care for a woman with a BMI of 30kg/m² and above

You will be advised not to put on excessive amounts of weight during your pregnancy – ideally you should try to maintain your current weight.

This is best achieved by following a healthy diet and lifestyle including:

- Eating regular meals
- Cutting down on fatty and sugary foods
- Not drinking alcohol